

SEC. 21. Section 9719 of the Welfare and Institutions Code is amended to read:

9719. (a) The office shall sponsor a meeting of representatives of approved organizations at least twice each year. The office shall provide training to these representatives as appropriate. Prior to the certification, by the office, of an ombudsman, individuals shall meet the following requirements:

- (1) Have a criminal offender record clearance conducted by the State Department of Social Services. A clearance pursuant to Section 1569.17 of the Health and Safety Code shall constitute clearances for the purpose of entry to any long-term care facility.
- (2) Have received a minimum of 36 hours of training approved by the office.
- (3) Have received a minimum of 12 hours of additional training annually.

(b) Beginning July 1, 2007, the State Department of Social Services shall conduct a criminal offender record information search, pursuant to Section 1569.17 of the Health and Safety Code, for applicants seeking certification as ombudsmen. The department shall notify the individual and the office of the individual's clearance or denial.

(c) Within a reasonable time after July 1, 2007, the office shall seek the clearance of all ombudsmen already certified or designated as of July 1, 2007. Applicants for certification as an ombudsman and any currently certified or designated ombudsman shall not be responsible for any costs associated with transmitting the fingerprint images and related information or conducting criminal record clearances.

(d) Nothing in this section shall be construed to prohibit the Department of Justice from assessing a fee pursuant to Section 11105 of the Penal Code to cover the cost of searching for or furnishing summary criminal offender record information.

LONG-TERM CARE OMBUDSMAN PROGRAM
Proposed Fingerprinting General Fund Allocations
Allocation by PSA for Fiscal Year 2007-2008
As of 3/26/07

PSA	Counties	Allocation
1	Del Norte, Humboldt	498
2	Lassen, Modoc, Shasta, Siskiyou, Trinity	1,505
3	Butte, Colusa, Glenn, Plumas, Tehama	1,008
4	Nevada, Placer, Sacramento, Sierra, Sutter, Yolo, Yuba	4,474
5	Marin	578
6	San Francisco	1,132
7	Contra Costa	2,604
8	San Mateo	1,962
9	Alameda	2,897
10	Santa Clara	2,988
11	San Joaquin	1,001
12	Alpine, Amador, Calaveras, Mariposa, Tuolumne	449
13	San Benito, Santa Cruz	484
14	Fresno, Madera	2,035
15	Kings, Tulare	876
16	Inyo, Mono	584
17	San Luis Obispo	790
17A	Santa Barbara	1,109
18	Ventura	1,459
19	Los Angeles County	12,207
20	San Bernardino	3,099
21	Riverside	3,528
22	Orange	6,447
23	San Diego	5,314
24	Imperial	266
25	Los Angeles City	2,149
26	Lake, Mendocino	455
27	Sonoma	1,205
28	Solano	1,022
28A	Napa	539
29	El Dorado	301
30	Stanislaus	830
31	Merced	387
32	Monterey	728
33	Kern	1,090
TOTAL ALLOCATION		68,000

CRIMINAL RECORD STATEMENT

ATTACHMENT 3

State law requires that persons associated with licensed facilities be fingerprinted and disclose any conviction. A conviction is any plea of guilty or nolo contendere (no contest) or a verdict of guilty. The fingerprints will be used to obtain a copy of any criminal history you may have.

Have you ever been **convicted of a** crime in California ?..... ☐ YES ☐ NO

Have you ever been convicted of a crime from another state, federal court, military or jurisdiction outside of U.S.?..... ☐ YES ☐ NO

Criminal convictions from another State or Federal court are considered the same as criminal convictions in California.

If you answer YES, give details on the back of this page indicating the nature and circumstances of each crime and the date and the location in which each crime occurred.

You must disclose convictions, including reckless and drunk driving convictions even if:

1. It happened a long time ago;
2. It was only a misdemeanor;
3. You didn't have to go to court (your attorney went for you);
4. You had no jail time or the sentence was only a fine or probation;
5. You received a certificate of rehabilitation;
6. The conviction was later dismissed, set aside or the sentence was suspended.

NOTE: IF THE CRIMINAL BACKGROUND CHECK REVEALS ANY CONVICTION(S) THAT YOU DID NOT DISCLOSE ON THIS FORM, YOUR FAILURE TO DISCLOSE THE CONVICTION(S) WILL RESULT IN AN EXEMPTION DENIAL, LICENSE APPLICATION DENIAL, LICENSE REVOCATION, OR EXCLUSION FROM A LICENSED FACILITY.

I declare under penalty of perjury under the laws of the State of California that I have read and understand the information contained in this affidavit and that my responses and any accompanying attachments are true and correct.			
FACILITY NAME		FACILITY NUMBER	
YOUR NAME (PRINT CLEARLY)	YOUR ADDRESS	CITY	ZIP
SOCIAL SECURITY NUMBER (SEE PRIVACY STATEMENT ON REVERSE SIDE)	DATE OF BIRTH	DMV LICENSE NUMBER	
SIGNATURE		DATE	

I. Instructions to Respondents:

If you have been convicted of a crime in California or from another state or in federal court, provide the following information:

What was the offense? _____

In which state and city did you commit the offense?

When did this occur?

Tell us what happened. (Use additional sheets of paper if needed)

I certify under penalty of perjury that the above information is true and correct to the best of my knowledge.

Signature _____ **Date** _____

II. Instructions to Licensees:

If the person discloses a criminal conviction, review the person's statement and discuss it with your Licensing Program Analyst (LPA). Maintain this form in your facility personnel file and send a copy to your LPA.

PRIVACY STATEMENT

Pursuant to the Federal Privacy Act (P.L. **93-579**) and the Information Practices Act of 1977 (Civil Code section 1798 et seq.), notice is given for the request of the **Social Security Number (SSN)** on this form. The California Department of Justice uses a person's SSN as an identifying number. The **requested SSN** is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check.

In order to be licensed, work at, or be present at, a licensed facility, the law requires that you complete a criminal background check. (Health and Safety Code sections **1522**, 1568.09, 1569.17 and 1596.871) The Department will create a file concerning your criminal background check that will contain certain documents, including information that you provide. You have the right to access certain records containing your personal information maintained by the Department (Civil Code section 1798 et seq.). Under the California Public Records Act, the Department may have to provide copies of some of the records in the file to members of the public who ask for them, including newspaper and television reporters.

NOTE: IMPORTANT INFORMATION

The Department is required to tell people who ask, including the press, if some one in a licensed facility has a criminal record exemption. The Department must also tell people who ask, the name of a licensed facility that has a licensee, employee, resident, or other person with a criminal record exemption.

If you have any questions about this form, please contact your local licensing regional office.

REQUEST FOR LIVE SCAN SERVICE

BCII 8016 (3107)

Clear Form

ATTACHMENT 4**Applicant Submission**

Code assigned by DOJ			
Job Title or Type of License, Certification or Permit:			
Agency Address Set Contributing Agency:			
Agency authorized to receive criminal history information		Mail Code (five-digit code assigned by DOJ)	
Street No.	Street or PO Box	Contact Name (Mandatory for all school submissions)	
City	State	Zip Code	Contact Telephone No.
Name of Applicant:			
(Please print) Last		First	MI
Alias:		Driver's License No:	
Last	First		
Date of Birth:	Sex:	Male	Female Misc. No. BIL -
Height:		Agency Billing Number	
Weight:		Misc. Number:	
Home Address:			
Eye Color:		Hair Color:	
		Street No.	Street or PO Box
Place of Birth:		City, State and Zip Code	
Social Security Number:			
Your Number:			
OCA No. (Agency Identifying No.)		Level of Service:	DOJ FBI
If resubmission, list Original ATI Number:			
Employer: (Additional response for agencies specified by statute)			
Employer Name			
Street No	Street or PO Box	Mail Code (five digit code assigned by DOJ)	
City	State	Zip Code	Agency Telephone No. (optional)
Live Scan Transaction Completed By:			
		Name of Operator	Date
Transmitting Agency		ATI No.	Amount Collected/Billed

ORIGINAL — Live Scan Operator; SECOND COPY — Applicant; THIRD COPY (if needed) — Requesting Agency

**CALIFORNIA DEPARTMENT OF AGING
OFFICE OF THE STATE LONG-TERM CARE OMBUDSMAN**

**NOTICE OF CRIMINAL BACKGROUND CLEARANCE
REQUIREMENT**

I understand that I must submit to a criminal background clearance via Live Scan fingerprinting to become a certified Long-Term Care Ombudsman in the State of California.

I have completed a Criminal Record Statement form LIC 508 disclosing any convictions. I understand that giving false or incomplete information is sufficient cause to disqualify me.

I understand that if I have been convicted of a crime that prohibits my participation in the Long-Term Care Ombudsman program, I shall be denied certification upon notification by the California Department of Social Services. Notification will be based upon results of criminal history records that will be processed by the Department of Justice and the Federal Bureau of Investigation.

I understand that I may file an exemption request with Department of Social Services if the background clearance determination results in a denial based upon specified crimes wherein exemptions may be allowed.

I am not responsible for Live Scan fingerprinting fees although I may be requested by the Long-Term Care Ombudsman Program to pay fingerprinting fees and be reimbursed.

Name

Date

PSA:	PROGRAM NAME:
REPORTING MONTH YEAR:	

Ombudsman Coordinator	Date
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If more space is needed, please use an additional sheet.

OSLTCO
0101 0607

Processing of Records When Criminal History Exists

If an individual has a criminal history, DOJ sends a criminal record transcript to the DSS Caregiver Background Check Bureau (CBCB). The transcript lists arrests and convictions. The FBI notifies CBCB of any criminal history information. There are often delays in receiving FBI information; therefore, a determination is made based on DOJ's information. If FBI information is received later that indicates a serious crime, CBCB takes the action as described below under subsequent arrests and convictions.

Following is a list of established procedures used by DSS CBCB.

Processing of Non-exemptible Crimes

An individual with non-exemptible conviction(s) is not eligible to request a criminal record exemption. DSS sends a letter to the applicant and Office of the State Long-Term Care Ombudsman (OSLTCO) if the applicant has a non-exemptible conviction.

Staff/volunteers that have criminal histories with non-exemptible crimes need to be decertified. Depending on the seriousness of the crime, staff that does not have contact with residents may be able to sign an Oath of Confidentiality/No Contact With Residents form and continue working in the Program. Determinations will be evaluated on a case-by-case basis by the OSLTCO in cooperation with the local Ombudsman Program.

Processing of Exemptible Crimes

CBCB staff review each transcript according to established procedures. Exemptible crimes tend to be non-violent misdemeanors where there is no pattern of criminal activity. If convictions are listed for crimes that are exemptible, the following steps will occur:

Simplified Exemption -- If a conviction meets criteria for a simplified exemption approval, the CBCB will issue a letter of approval to the OSLTCO and the applicant. Normally, the simplified exemption approval is issued approximately 5 to 10 days after DSS receives the criminal history information from DOJ or the FBI.

Standard Exemption -- CBCB sends an exemption request notice to the applicant and the OSLTCO. The letter explains to applicants how to request an exemption and lists the documents/information the individual must submit with the exemption request. DSS notifies applicants to send the documents/information to the DSS. At their discretion, DSS staff may consult with CDA regarding decisions about conditional exemptions.

If an exemption is approved, CBCB issues a standard exemption approval letter to the applicant and to the OSLTCO.

If the exemption is approved with restrictions, DSS sends a conditional exemption letter to the OSLTCO, listing restrictions or terms of conditional approval. The OSLTCO has the option of accepting or rejecting the conditional terms.

If the exemption request is denied, DSS sends a notification of standard exemption denial to the applicant and the OSLTCO.

Processing of Arrest Warrants

Exemption requests will not be granted for individuals with active arrest warrants.

Rejected Live Scan Fingerprints

DOJ will reject Live Scan fingerprints that are not readable. If an individual's fingerprints are rejected, DSS sends a letter to the applicant that a second Live Scan is required. The individual needs to submit a copy of the notice and the original receipt to the organization where a second Live Scan is done. If the fingerprints are rejected twice with verification from law enforcement that the individual is unable to provide legible prints, a criminal history is conducted based on a name search according to established procedures. Subsequent arrest or conviction information is not available for individuals who have been issued a clearance based on a name search.

Arrest-only Investigations

DSS reviews arrest-only records and determines whether investigations are necessary based upon established background clearance procedures. If an investigation is necessary, it is conducted according to established procedures.

Subsequent Arrests and Convictions

When DSS receives a subsequent arrest report, it is handled as outlined in the Arrest-only Investigations section above. If a subsequent conviction received by DSS is a non-exemptible crime, the OSLTCO and the individual are notified. The OSLTCO will decertify the individual if he or she is an existing Ombudsman. If the conviction is for an exemptible crime, the procedures listed above in the Processing of Exemptible Crimes will be followed.